

Health First Colorado's SUD Benefit Expansion:

Behavioral Health Integration Sub-committee

December 2020

Presented by:
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ACC SUD Administrator

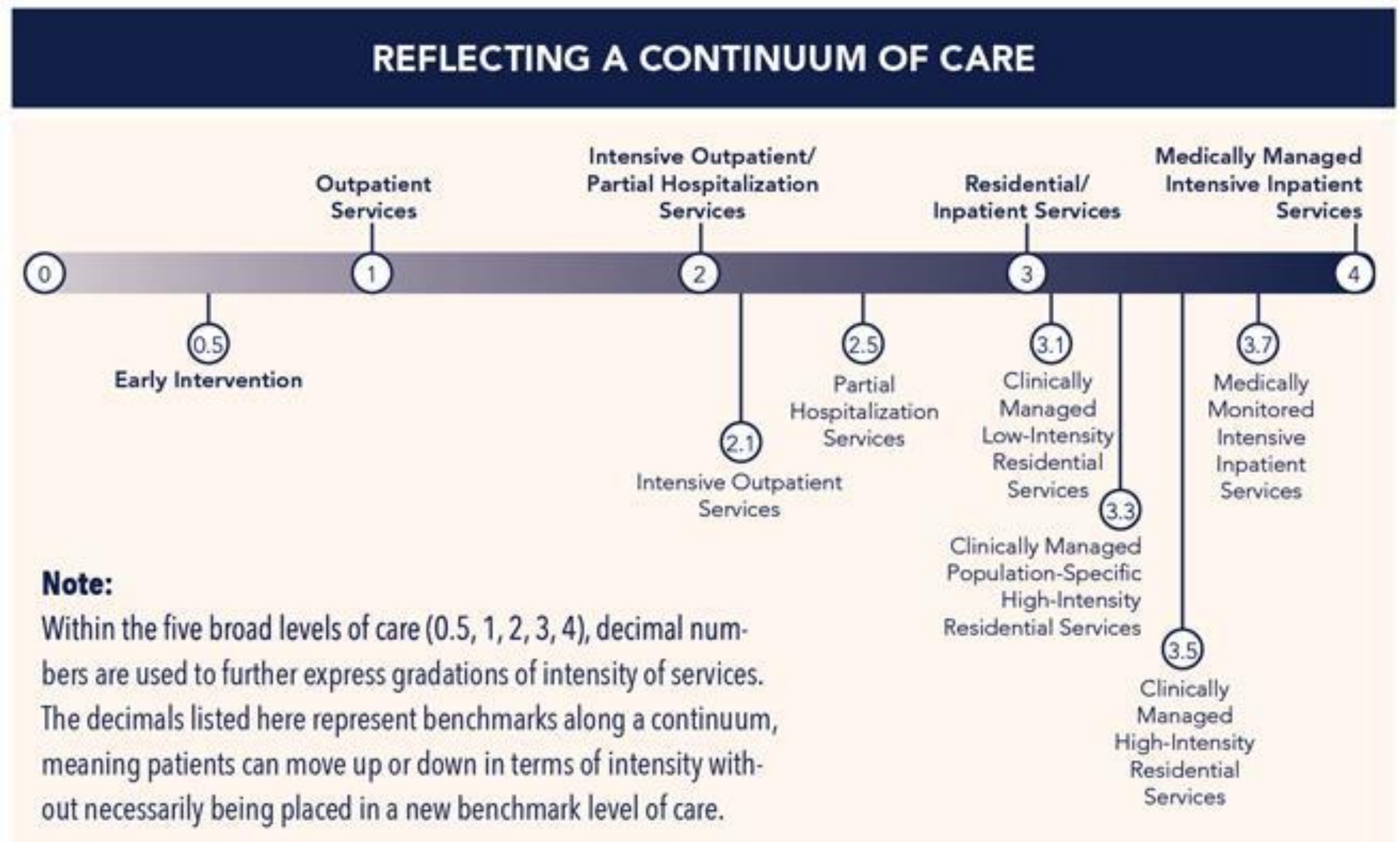
Background

Benefit Revision Background

- House bill 18-1136
- Correspondence with the Centers for Medicare and Medicaid Services (CMS) to determine path to open coverage of residential and inpatient SUD services
- October 2019: Submitted an 1115 waiver application for coverage of SUD stays in IMDs and state plan amendment for coverage in non-IMDs

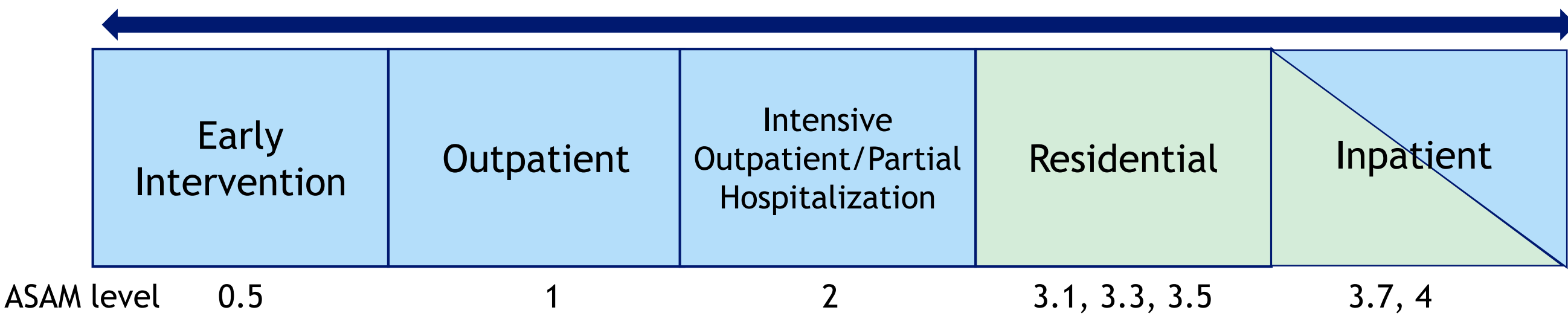
Coverage of the SUD continuum

American Society of Addiction Medicine (ASAM) SUD Treatment Continuum

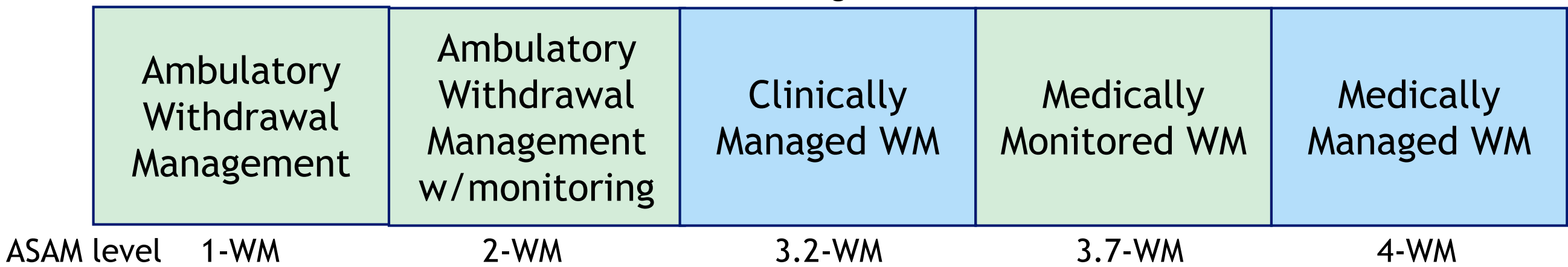


Health First Colorado Coverage of SUD Services

SUD Continuum of Care



Withdrawal Management Services



 Current coverage  Future coverage

Social detox (3.2WM) change

Current codes

S3005

T1007

T1019

T1023

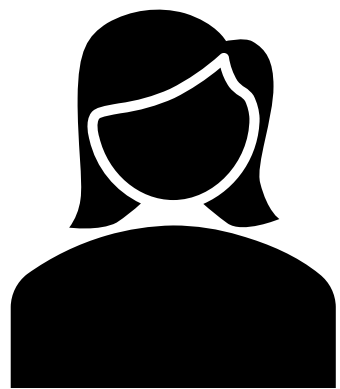


Future code

H0010

Delivery System

Nearly all claims will be submitted to the RAEs.

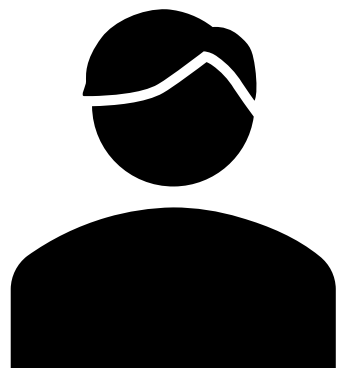


Member
enrolled in
RAE



Bill the RAE

In rare instances:



Member
NOT
enrolled in
RAE



Bill the Health First
Colorado Web Portal

Delivery System

- Regional Accountable Entities (RAEs) will manage services
- Costs built in capitated payment rate
- As with other services under the capitation, there will be no co-pays for members
- RAE Responsibilities
 - Network development across SUD continuum
 - Administer covered services
 - Utilization management
 - Care coordination

Special Connections:

Treatment for Pregnant and Parenting Individuals

- Will now be managed by the RAEs
 - Previously billed FFS directly to Health First Colorado
 - Programs will need to contract with at least one RAE to continue to participate
- Programs will continue to be certified by OBH for Gender Responsive Treatment
- Note: Per HB19-1193, eligibility to enroll in Special Connections has been extended up to one year postpartum

Benefit Policies

- Payment will require SUD primary diagnosis and medical necessity
- Length of stay is determined by medical necessity
- Medical necessity will be based on ASAM Criteria
- RAEs will conduct UM and require prior authorization for most services



Can Institutes for Mental Diseases (IMDs) bill for these services?

Yes.

IMDs are defined as facilities of more than 16 beds that are primarily engaged in diagnosis, treatment, or care of persons with mental diseases, including substance use disorder.

The day limit restrictions for psychiatric stays in IMDs do not apply to the SUD benefit.

Step-by-Step Requirements

- ✓ License with the Office of Behavioral Health.
- ✓ Enroll with Health First Colorado.
- ✓ Contract and credential with each Regional Accountable Entity (RAE) that you will bill for services.

Billing Treatment and R & B

Inpatient Treatment: *Hospitals* billing inpatient services (3.7 and 3.7WM) will be paid a per diem that includes treatment *and* room and board.

Residential Treatment: *Room and board is not included in payments for levels 3.1-3.5 and must be billed to the MSOs.*

Treatment Providers

Services will be offered in three types of facilities:

Provider type 64 (SUD Clinic)

02 Hospitals (Specialty Psychiatric or SUD Hospital)

01 Hospitals (General Hospital)

Facility type varies by level of care.

Billing Codes for Non-hospital Providers

Level of Care	Procedure Code	Modifier 1 (SUD)	Modifier 2 (LOC)
3.1	H2036	HF	U1
3.2WM	H0010	HF	--
3.3	H2036	HF	U3
3.5	H2036	HF	U5
3.7	H2036	HF	U7
3.7WM	H0011	HF	--

Coding of Services by Hospitals

Hospitals will bill revenue codes for 3.7 and 3.7WM services.

Coding practices for *hospitals* are determined by the individual RAE being billed.

FFS claims should be coded according to coding manual instructions which specifies revenue codes to be billed.

Thank you!

Contact

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Stakeholder webpage:
<https://www.colorado.gov/pacific/hcpf/ensuring-full-continuum-sud-benefits>